

2021-  
2022

# VAHCS Salt Lake City Clinical Psychology Postdoctoral Fellowship: Geropsychology & Health Psychology Tracks



George E. Wahlen Department of Veterans  
Affairs Medical Center  
2021-2022

# VAHCS SALT LAKE CITY CLINICAL PSYCHOLOGY POSTDOCTORAL FELLOWSHIP: GEROPSYCHOLOGY & HEALTH PSYCHOLOGY

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Salt Lake City Health Care System  
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**Application Due Date: January 1, 2021**

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## **POSTDOCTORAL FELLOWSHIP** **TRAINING DIRECTOR LETTER**

Dear Postdoctoral Fellowship Applicant:

We appreciate your interest in the Clinical Psychology Postdoctoral Fellowship Program at the George E. Wahlen Department of Veterans Affairs Salt Lake City Health Care System (VASLCHCS). We know you have many choices and are delighted you are considering our site among your options. The postdoctoral training year is an exciting, yet challenging time as fellows continue their growth as professionals, focus on honing their skills in a chosen area of interest, and prepare to enter the job market. We take great joy in being a part of this process and place education and training as a top priority in our program. We value the collegial working relationships with fellows, the opportunity to teach and supervise, and strive to create a positive environment for learning and growth.



The VASLCHCS has a long history of clinical psychology training. The internship program was established in 1952 and has been APA accredited since 1979. In 2007, the VASLCHCS was awarded two clinical psychology postdoctoral positions for PTSD. We also offer a two-year GRECC-funded post-doctoral fellowships in Geropsychology and a two-year postdoctoral position at the MIRECC, with an emphasis in suicide. In 2013 the VASLCHCS was awarded three additional post-doctoral fellowship positions which have been used to develop positions in Health Psychology, Geropsychology, and most recently Addictions Treatment.

The following brochure describes the philosophy and goals of the Psychology Fellowship Program for the Geropsychology and Health Psychology Tracks, possible clinical experiences, requirements, and application procedures. We hope that this brochure provides you with a sense of the fellowship training experience at the VASLCHCS and reflects our enthusiasm for training. It is difficult to represent the character of a training program in writing, so please do not hesitate to contact me directly with any questions about our program. We wish you the best during this exciting time in your training!

## **STATEMENT REGARDING COVID-19**

The COVID-19 pandemic has created numerous personal and professional challenges for us all. One of these challenges is uncertainty about what will happen next week, next month, and especially one year from now.

The Salt Lake City psychology training program has prided itself on its transparency providing detailed and accurate information about our program and training opportunities. With COVID, transparency means we cannot definitively predict how specific rotations and adjunctive training opportunities may evolve for the 2021-2022 training year.

With confidence we can say that there will likely be more utilization of telehealth and technology-based delivery platforms. We do not expect there to be any significant changes to the base clinical services or populations served through relational and adjunctive experiences described in our materials.

A lot has happened these last 9 months with all trainees and many staff abruptly shifting to providing clinical services and training remotely. However, we want to assure you, that even through these challenging times our dedication to high-quality clinical care, psychology training, and our dedication to the trainees themselves has never been stronger. These will always be cornerstone elements of the VA Salt Lake City psychology program. This we can predict!

We will update our public materials as we know more about what will be for the 2021 training year. Please feel free to reach out to us if you have any questions.

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Co-Director of Psychology Fellowship Training  
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801-582-1565 x2088  
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## **GEORGE E. WAHLEN VETERANS AFFAIRS**

### **SALT LAKE CITY HEALTH CARE SYSTEM**

The Clinical Psychology Postdoctoral Fellowship Program is sponsored by the VA Salt Lake City Health Care System (VASLCHCS) located in Salt Lake City, Utah.

The main facility is located on an 81-acre campus adjacent to the Salt Lake City Veterans Affairs Regional Office and the University of Utah. It's a mid-sized primary and tertiary care facility with 133 beds providing a full range of patient care services. Comprehensive health care is provided through medicine, surgery, psychiatry, physical medicine and rehabilitation, neurology, oncology, dentistry, geriatrics, and extended care.



The VASLCHCS is part of VA Network (VISN) 19, which encompasses the largest geographic area in the 48 contiguous states. We serve an area covering the entire state of Utah, the majority of Montana, Wyoming and Colorado, and portions of Idaho, Kansas, Nebraska, Nevada, and North Dakota. We have eleven Community Based Outpatient Clinics (CBOCs) and two Outreach Clinics in remote areas of Utah, Idaho and Nevada. During fiscal year 2010, the VASLCHCS served 45,2829 Veterans in over 500,000 outpatient visits.

In terms of demographics, 94% of the veterans served by VASLCHCS are male; 6% are female. Ninety-one percent identify as Euro-American, 5% as Latino, 2% as African-American, less than 1% as Asian American, and less than 1% as Native American. The socioeconomic statuses of the veterans vary widely.

As a Dean's Committee Medical Center, VASLCHCS is closely affiliated with the University Of Utah School of Medicine, located less than one mile away. In addition to this longstanding affiliation, VASLCHCS maintains active affiliations with several other Utah colleges and universities and serves as a training site for students, interns, residents, and fellows from a variety of health care professions. VASLCHCS is also home to the Salt Lake City Geriatric Research, Education, and Clinical Center (GRECC), Mental Illness Research, Education, and Clinical Center (MIRECC), and the VHA Office of Rural Health Resource Center (RHRC). Finally, VASLCHCS serves as the location for the VHA funded Mental Health Strategic Health Care Group Informatics Section.

In 2006, VASLCHCS was designated a Level III Polytrauma Center to respond to the needs of Veterans of the Afghanistan and Iraq conflicts who have suffered multiple traumatic injuries, including TBI and PTSD.

Further information about the VA Salt Lake City Health Care System is available at <https://www.saltlakecity.va.gov/>.

## **VASLCHCS PSYCHOLOGY TRAINING PROGRAM MISSION**

Training future psychologists is important to us. Psychologists are charged with improving people's lives and fostering a better society. These are challenging and rewarding tasks for which proper training is critical. All of us had teachers and mentors and supervisors who understood this responsibility and who took the time to guide and shape and nurture our growth. We train to continue this service. We train because it matters to us and to the Veterans we serve. From practicum students to interns to postdoctoral fellows, our mission is to train and mentor the next generation of professional psychologists who will serve and mentor and lead. We aim to provide strong clinical training with a focus on the professional development of the trainee, in the context of providing effective, comprehensive, evidence-based care to our nation's Veterans.

Our specific aims are to both broaden and refine trainees' existing clinical skills, to foster further growth in ethical and culturally competent therapy, assessment, research, supervision, and consultation, to facilitate reflective practice and self-care, to broaden communication and interpersonal skills, and to deepen trainees' sense of professional identity.

We expect that our psychologists-in-training will arrive with solid clinical skills, ethical practices, self-awareness, and sensitivity to diversity, as appropriate to their level of training, with strong clinical interests, and with a willingness to learn and grow in higher level skills. We expect that all of our trainees will consistently demonstrate benevolence, ethical behavior, and humility in their practice and training. We expect that you will commit to growing in your transition from student to professional and to actively seeking opportunities to facilitate this transition.

We, the faculty, commit to creating a supportive, safe, and nurturing training environment that facilitates this growth in our trainees. We commit to providing ethical and culturally competent, developmentally sensitive supervision, that fosters professional growth, autonomy, and accountability. We commit to consistently demonstrating benevolence, ethical behavior, and humility in our practice and supervision. We commit to continually examining our practices and to growing as supervisors.



(Delicate Arch  
Arches National Park, Utah)



# **CLINICAL PSYCHOLOGY POSTDOCTORAL FELLOWSHIP PROGRAM**

## **FELLOWSHIP GOALS**

The Postdoctoral Fellowship Program ascribes to the practitioner-scholar model of training. As such, the goal of the fellowship is to train psychologists to function in an informed, competent, independent, and ethical manner across a wide range of health care settings. The program's structure allows for both breadth and depth of clinical experiences, as well as exposure to a variety of intervention approaches and professional issues. Fellows are here for training and professional development, not service delivery; consequently, didactics, training seminars, and any other educational activities take priority in a fellow's schedule.

The clinical psychology postdoctoral fellowship provides advanced interdisciplinary education and training across a variety of medical settings for the purpose of training future psychologists who are capable of providing the next generation of psychological services within Veterans Affairs. Even though this is classified as a general *clinical* fellowship training, the geropsychology and health tracks emphasize the provision of integrated health psychology and geropsychology services to veterans within medical settings.

## **FELLOWSHIP STRUCTURE**

The fellowship program at the VHASLCHCS is made up of 4 emphasis areas. The Psychology Department of the Salt Lake City VA Healthcare System will offer *five* fellowship positions for 2021-2022:

- One position in Addictions Treatment (see Addictions Treatment brochure)
- One position in Geropsychology;
- One position in Health Psychology;
- Two positions in PTSD (see PTSD brochure).

Although fellows in these various tracks are largely working in their areas of emphasis, there is an effort to create a sense of community amongst our postdoctoral fellows through fellowship orientation, shared didactics, Pub Club, and fellowship events.

## **SCHEDULE**

The Clinical Psychology Postdoctoral Fellowship is a full-time, 12-month continuous appointment and will be primarily clinical in nature. In general fellows work 40-45 hours per week. Fellows typically complete a total of 2000 hours of training in order to be eligible for licensure in most states. The usual tour of duty is 8:00 – 4:30 pm, although this schedule adjusts to accommodate evening groups or other program activities. However, the completion of clinical duties may require extra working hours. The parameters of each training experience are detailed the first week of orientation.

## **FELLOW RESOURCES**

The Geropsychology and Health Psychology Fellows have an office with access to computers with a Microsoft Office Suite, printer access, and a nationwide integrated electronic medical chart named CPRS. There is also computer support through IRMS. The VA Salt Lake City has a medical library that provides a wide range of psychology, psychiatry, gerontology, and other journals consistent with the needs of staff and the training program. Fellows have access to the VA library and may access the

libraries at the University of Utah by either personal access or inter-library loan. Fellows receive administrative support from administrative support assistants who help fellows with several aspects of the fellowship.

#### **DUE PROCESS:**

All trainees are afforded the right to due process in matters of problematic behavior and grievances. Due process documents are a part of the orientation manual and are reviewed during orientation. A copy of our due process policy is available on request.

#### **SELF-DISCLOSURE:**

We do not require trainees to disclose personal information to their clinical supervisors except in cases where personal issues may be adversely affecting a trainee's performance and such information is necessary to address these difficulties.

#### **ACCREDITATION STATUS**

The Clinical Psychology Postdoctoral Fellowship Program at the VA SLC HCS is currently accredited by the American Psychological Association. For information regarding APA accreditation of this or other accredited training programs, please contact:

Commission on Accreditation (CoA)  
American Psychological Association  
750 First Street, NE  
Washington, DC 20002-4242  
Phone: (202) 336-5979  
FAX: (202) 336-5978

## **GEROPSYCHOLOGY TRACK**

This track provides general clinical psychology fellowship training, with an emphasis in geriatrics. Broadly, the geriatric training provided is consistent with the Pikes Peak Model for Training in Professional Geropsychology. Specific geriatric emphases include: 1) evidence-based assessment and treatment of psychological disorders among older adults; 2) biopsychosocial methods for managing disruptive behaviors associated with dementia; 3) neuropsychological assessment and dementia management; 4) behavioral medicine interventions addressing common problems among older adults, such as pain, disability, sleep, weight loss, smoking cessation, and medical compliance; 5) interdisciplinary consultation; 6) capacity assessments when there are questions about a patient's ability to make medical decisions, perform other specific functions, or live independently; 7) development of clinical supervision competencies; and 8) identification of, understanding, and addressing ethical issues common among geriatric populations.

Fellows will provide psychological services across a variety of diverse clinical settings, including Home Based Primary Care (HBPC), outpatient geriatric primary care clinics, specialty geropsychiatry-medical clinic, primary care, and palliative care. Fellows will also gain experience working with multidisciplinary programs, including the Geriatric Research, Education, and Clinical Center (GRECC), the Office of Rural Health—Western Region, and the University of Utah, Division of Geriatrics. It is also anticipated that fellows will cross-train in some of the same training experiences as the health psychology fellows.

Fellows have the opportunity to participate actively as members of interdisciplinary teams in HBPC and Geriatric Primary Care clinics. The remaining rotations will be tailored to fit the individual needs and preferences of the fellow. Rotations may consist of a combination of geriatric experiences (approximately 75% of the fellow's time) including Home Based Primary Care, outpatient geriatric clinic, or geropsychiatry medical clinic. One geriatric clinic and Home-Based Primary Care totaling 10-20 hours per week are required. Fellows will also have the opportunity to develop expertise in complementary areas of health psychology. Minor rotation experiences (approximately 25% of fellows time) may include primary care-mental health integration (PC-MHI), short-term therapy in primary care, MOVE program, smoking cessations program, inpatient rehabilitation, consultation and training for PACT team members, MH Consult, CBT for Chronic Primary Care Pd Opioid management program (PC-POP), and transplant and bariatric surgery evaluations (see Health Psychology section for descriptions). Fellows will select opportunities offered from the areas/supervisors listed above. Experiences can be designated as year-long or time limited.

# GEROPSYCHOLOGY ROTATIONS

## Home Based Primary Care (HBPC)

Supervisor: Lauren Masuda, PsyD

The VA Home Based Primary Care (HBPC) program provides comprehensive, interdisciplinary primary care services in the homes of veterans with complex and chronic, disabling disease. In addition to primary care interventions, HBPC provides palliative care, rehabilitation, disease management, and care coordination services. HBPC targets veterans in advanced stages of chronic disease, particularly those at high risk of recurrent hospitalization or nursing home placement. Outcome measures have demonstrated HBPC to be effective in managing chronic disease and reducing inpatient days and total cost of care. Our HBPC team includes representatives from medicine, nursing, pharmacy, social work, occupational therapy, and dietetics. HBPC manages (1) patients with multiple interacting chronic medical problems requiring longitudinal intervention to maintain health status or slow functional decline, in order to reduce or delay institutionalization; (2) certain patients with relatively short-term problems, who need health services, home training, and home adaptation until they can be managed in an outpatient clinic; and (3) patients with advanced terminal illness who prefer palliative care. HBPC provides a unique opportunity for fellows to be part of a diverse team with opportunities to work collaboratively, co-treat clients when appropriate, foster effective communication and teamwork amongst providers, and help the team to cope with various challenges.

The postdoctoral fellow provides assessment and intervention to individuals and families to address psychological issues that are interfering with their medical care, compromising their health status and functional capacity, and/or reducing their quality of life. Issues include, but are not limited to: helping patients cope with grief, depression, anxiety, and other psychological issues related to the aging process; coping with chronic medical illnesses, and/or other life stressors; interventions to increase compliance with and adjustment to treatment regimens; and working with caregivers to improve patient well-being and treatment compliance. The postdoctoral fellow also provides comprehensive psychological, neuropsychological, and capacity evaluations.

## Outpatient Geriatric Clinics

Supervisor: Bret Hicken, PhD

These weekly primary care clinics serve geriatric patients and are staffed by geriatric fellows and geriatricians, clinical pharmacists, social workers, in addition to the psychology trainee. All patients are seen by the medical staff for regular primary care. Psychology trainees serve in a consult/liaison role conducting brief psychological and cognitive assessments of clinic patients as part of the primary care appointment. Trainees may also consult with the team about patient issues or offer instruction to staff on psychological issues. Time-limited interventions may also be incorporated.

## Geriatric Medical Psychiatry Clinic

Supervisor: Bret Hicken, PhD

This weekly primary care clinic serves geriatric patients with complicated medical and psychiatric needs. Veterans referred to this clinic typically have significant mental health and/or cognitive issues and disruptive behaviors that have become difficult to manage for caregivers and providers. The philosophy of GMP is “patient-centered” and “whole-person” in that we address the psychosocial, environmental, and medical factors that influence behavior. In addition to the psychology trainee, the clinic includes an attending physician, social worker, and multiple trainees from many disciplines such as psychiatry, geriatrics, and pharmacy. Psychology trainees function in a variety of capacities in this clinic. They may provide direct patient care in the form of brief psychological and cognitive assessments as part of the patient’s clinic appointment. They may provide brief intervention in clinic or arrange for an appointment at a later date to address clinical concerns that require follow-up. Trainees also function in a consultation capacity by providing the team with observations, impressions, and treatment recommendations about psychological and cognitive issues

The following is an example of a possible schedule for a fellow with an emphasis in geropsychology:

### Major Rotation: Geropsychology

Months 1-4	Months 5-8	Months 9-12
<ul style="list-style-type: none"><li>• Home-Based Primary Care</li><li>• Outpatient Geriatric Clinic</li></ul>	<ul style="list-style-type: none"><li>• Home-Based Primary Care</li><li>• Geriatric Assessment Clinic</li></ul>	<ul style="list-style-type: none"><li>• Home-Based Primary Care</li><li>• Geriatric Medical Psychology Clinic</li></ul>

### Minor Rotation: Health Psychology

Months 1-6	Months 7-12
<ul style="list-style-type: none"><li>• CBT for Chronic Pain</li><li>• Transplant Evaluation</li></ul>	<ul style="list-style-type: none"><li>• PC-MHI</li><li>• HPDP</li></ul>

## **HEALTH PSYCHOLOGY TRACK**



(Med Psych Team Retreat – Lauren Masuda PsyD, Kate Robertson MD, Jessica Howsley MD Michael McIntosh MD, Billy Watts MD, Amanda Kutz PhD, Amber Martinson PhD, Renn Sweeney PhD, Tracy Black, PhD)

The Health Psychology emphasis area allows the fellow the opportunity to develop advanced training skills in integrated behavioral medicine in inpatient and outpatient settings throughout the hospital. Fellows will work with inpatient medical teams, primary care Patient Aligned Care Teams (PACT), as well as other interdisciplinary medicine teams to address the veteran's healthcare needs through a collaborative approach with shared decision-making. Fellows will have opportunities to provide brief interventions, short-term counseling, assessment, facilitate interdisciplinary health behavior groups, and provide consultation and training for medical team members. Fellows will also have opportunities to develop quality metrics for the facility's Health Promotion and Disease Prevention (HPDP) efforts. Finally, fellows will also have the opportunity to develop expertise in complementary areas of interest including geriatrics and rural populations. Fellows will work with the training director and supervisors to customize the training year to meet their individual needs, preferences, and abilities. Generally, however, health psychology fellows will complete one 6 month rotation in inpatient MH consult/chronic pain/transplant evaluation and one 6 month rotation in PC-MHI and HPDP which will



occupy approximately 75% of the fellow's time. Approximately 25% time will be devoted to minor emphasis rotations in geriatrics and rural health (see Geropsychology Section for description). Fellows will select opportunities offered from the rotations listed below. Experiences can be designated as year-long or time limited.

## HEALTH PSYCHOLOGY ROTATIONS

### PAIN PSYCHOLOGY ROTATION

Supervisor: Amber Martinson, PhD

The Pain Psychology Rotation consists of a combination of experiences available under the MedPsych Service and Whole Health Service, including:

1. Primary Care-Mental Health Integration (PC-MHI)
  - a. Cognitive-Behavioral Therapy (CBT) for Chronic Pain Program
  - b. Brief Outpatient Therapy/ Assessment
2. Whole Health Primary Care Pain Education & Opioid Monitoring Program (PC-POP)
  - a. Education classes
  - b. Pain/opioid overdose risk assessments
  - c. Research (by request)

### Primary Care-Mental Health Integration (PC-MHI)

PC-MHI provides mental health primary care services to all primary care patients treated at the VAMC Salt Lake City through the Blue Clinic. PC-MHI's role in this clinic is an integrated one, as our service works collaboratively with the primary care providers to enhance treatment of medical and psychological problems presented by clinic patients. We use a blended model to provide both care management and co-located collaborative care to PACT teams and veterans. Our male and female veterans present with a range of often complex psychological and physical health concerns. Chronic pain syndromes, coping with chronic illness, grief, MST, PTSD, adjustment disorders, depression, anxiety disorders, compliance issues, and eating/weight disorders are presenting problems that are common to this population.

- Cognitive-Behavioral Therapy (CBT) for Chronic Pain Program: Psychology trainees will have the opportunity to co-lead the CBT for Chronic Pain Groups with Dr. Martinson that occur in SLC on Wednesdays at 3:00PM-4:00PM in Building 9, Classroom A/B, as well as the groups offered via telehealth (VA Video Connect) on Tuesdays 9:30AM-10:30AM. This is a closed group and runs for 6 weeks, with each week building on the previous week. This group takes a cognitive-behavioral approach with an acceptance and commitment therapy lens. Trainees are provided with a therapist manual for this group to facilitate consistency between rounds (for

research purposes), though new perspectives and techniques are welcomed. The role trainees take in this program is dependent upon interest and familiarity with treating complex chronic pain.

- Brief Outpatient Therapy/Assessment: Psychology trainees will have the opportunity to carry a caseload of individual patients for brief outpatient therapy. Referrals on this rotation will primarily focus on chronic pain, though could include adjustment issues (i.e., adjustment to chronic illness, current life stressors, end of life issues), sleep disturbance, and mild depression/anxiety. Brief neuropsychological assessment cases are also available.

### Whole Health Primary Care Pain Education & Opioid Monitoring Program (PC-POP)

PC-POP is comprised of an interdisciplinary team consisting of nurse practitioners (Jamie Clinton-Lont, MS, CNP, Director; 2<sup>nd</sup> to be hired 2020), a psychologist (Amber Martinson, PhD), and RN care managers (Kathie Sadler, RN, Program Manager; Julie Carney, RN; Tauna Thomas, RN, and Bill Jacobson, RN), who implement the VA/DoD guidelines for opioid prescribing for patients with noncancer pain seen in primary care. While there are 5 component parts of PC-POP as a whole (see below), *psychology trainees will specifically participate in the **educational and evaluation** components*. Psychology trainees will specifically be expected to participate in the education classes held on Tuesdays 12:30-2:30PM in Building 9, Theater.

#### 1. Chart review

- a. Review medical record for evidence of drug-related aberrant behaviors (EMIT, DOPL), history of substance use disorder(s), previous suicide attempts and hospitalizations.

#### 2. Education

- a. Provide patient education via PowerPoint on what opioids are and how to recognize and respond to an overdose (e.g., Naloxone education); statistics re: unintentional opioid overdose and how veterans are particularly at risk; how to keep medications safe from children and other household members in lock boxes or locked cabinets and the risks of sharing opioids with other people; risks associated with coingesting opioids with alcohol, other drugs, and concurrent sedating medications, such as benzodiazepines; Whole Health approach to patient care; evidence-based nonpharmacological treatments available for chronic pain including Cognitive-Behavioral Therapy for Chronic Pain (CBT-CP), Mindfulness Center, Living Well With Chronic Pain Class, Taking Charge of My Life and Health Class, Trauma Sensitive Yoga, and take-home self-help option.

#### 3. Evaluation

- a. Assess patient reported outcomes with norm-referenced assessment measures, including the Drug Abuse Screening Tool (DAST), Patient-Reported Outcomes Measurement Information System (PROMIS), Quality of Life Scale (QOL), Patient Health Questionnaire-9 (PHQ-9), and Generalized Anxiety Disorder 7-item (GAD-7). Document patient risk for unintentional opioid overdose as informed by assessment and phone interview data.

#### 4. Prescription

- a. Prescribe patients Narcan Nasal Spray and Polyethylene Glycol upon patient request. Opioids are not prescribed by PC-POP providers.

## 5. Action

- a. Develop patient-centered treatment plan which includes referral to one of the aforementioned nonpharmacological treatment interventions for pain.
- b. Document pertinent chart review findings, assessment findings, and treatment plan in medical record.
- c. Communicate aberrant findings to prescriber in real-time via medical record documentation, phone call, and/or email.

## Research

Dr. Martinson is currently the Principal Investigator for multiple IRB-approved studies examining outcomes for the PC-POP program. Psychology trainees, upon request, can participate in different levels of the research process which could result in authorship on peer-reviewed publications.

## HEALTH PROMOTION AND DISEASE PREVENTION (HPDP)

Supervisor: Renn Sweeney, PhD

HPDP programs are aligned with VHA's Mission to "honor America's Veterans by providing exceptional health care that improves their health and well-being", as well as with VHA's Vision, which emphasizes prevention and population health. HPDP programs also support VHA's efforts to transform from an episodic disease-focused model of care to a patient-driven Whole Health Model that encourages continuous Veteran engagement and promotes Veteran wellness, self-care, and self-management of chronic conditions. Many diseases that cause disability and death among Veterans can be prevented, mitigated, or delayed. HPDP services can lead to longer and healthier lives, reduce hospitalizations, preserve functionality, and enhance patient satisfaction and quality of life. Effective preventive services are available for the leading causes of death and morbidity. Screening tests, immunizations, preventive medications, and counseling to support health behavior change are the major strategies employed. The main behavioral factors contributing to preventable disease are tobacco use, physical inactivity, poor diet, unhealthy alcohol use, and overweight or obesity. Key interventions to reduce health risks include system-level, provider-level, and patient-level strategies that assist patients in changing risky behaviors and adopting healthier ones. Specific opportunities for Fellows include:

- 6 Week Tobacco Cessation Classes for Salt Lake City and via telehealth to CBOCs (Community Based Outpatient Clinics)
- MOVE! Weight Management Classes
- Consultation and training for primary care RN Care Managers and other PACT members in motivational interviewing, shared decision-making, and patient engagement;
- Supervision, Mentorship, and Education of Whole Health Coaches
- Employee Whole Health Coaching
- Health promotion events and projects
- Evaluation of quality metrics for the facility's health promotion/disease prevention efforts, and

- Participation in HPDP, National Center for Prevention (NCP), Local Whole Health VISN 19 HPDP, VISN Whole Health Steering and Office of Patient-Centered Care and Cultural Transformation (OPCC) committee meetings, trainings, and virtual meetings

### INPATIENT MENTAL HEALTH CONSULT LIAISON TEAM (MH CONSULT) & PRE-SURGICAL EVALUATION

Supervisors: Karen Jordan, PhD, Tracy Black, PhD

The Mental Health Consult Team is an interdisciplinary team consisting of Psychology, Psychiatry, Clinical Pharmacy and trainees from several other rotating mental health and medical disciplines. This team provides mental health services to patients within inpatient medical settings, including Acute Medicine, Surgery, Neurology, Telemetry, Dialysis, and Intensive Care Units by utilizing a consultation/liaison model. Common referral issues include medical decision-making capacity, cognitive functioning, adjustment to illness, evaluation/management of psychiatric symptoms (e.g., depression, anxiety, psychosis), and substance abuse/detoxification. Post-doctoral fellows, along with the supervising staff psychologist, have several responsibilities, including:

- Participation in patient-centered rounds.
- Conducting diagnostic evaluations.
- Administration of neuropsychological screenings.
- Providing brief inpatient psychotherapy.
- Conducting assessments and follow-up therapy for special medical populations including:
  - Solid organ transplant
  - Bone marrow transplant evaluations
  - Pre-surgical evaluations
  - Psychological evaluations for bariatric surgery

### PHYSICAL MEDICINE AND REHABILITATION (PM&R):

Supervisor: Karen Jordan, PhD

Fellows have the opportunity to respond to consults for rehabilitation psychology and follow inpatients for brief therapy and supportive counseling. Working with the Physical Medicine and Rehabilitation team includes attending the interdisciplinary team meeting and “rapid rounds”, seeing patients to support their adjustment to debility or chronic illness, and making recommendations to PM&R providers on how best to support rehab and recovery. “

**PRIMARY CARE-MENTAL HEALTH INTEGRATION (PC-MHI) WITH EMPHASIS IN INSOMNIA AND WEIGHT:**

Supervisor: Tracy Black, PhD, Amanda Kutz, PhD,

PC-MHI provides mental health primary care services to all primary care patients treated at the VAMC Salt Lake City through the Primary Care Clinic. PC-MHI's role in this clinic is an integrated one, as our service works collaboratively with the primary care providers to enhance treatment of medical and psychological problems presented by clinic patients. We use a blended model to provide both care management and co-located collaborative care to PACT teams and veterans. Our male and female veterans present with a range of often complex psychological and physical health concerns. Sleep disorders, coping with chronic illness, grief, MST, PTSD, adjustment disorders, depression, anxiety disorders, compliance issues, and eating/weight disorders are presenting problems that are common to this population. Typical activities for fellows on this rotation include:

- **Primary Care Consult/Triage:** Fellows will conduct Primary Care triage/consult. Fellows will respond to formal and informal (curbside) consults from primary care providers and medical residents for assistance in managing patients who present to the primary care clinic with mental health related issues. Patients are seen immediately during primary care appointments. Consults may require triage to outpatient mental health, assessment for psychiatric hospitalization, recommendations for psychiatric medication management within the primary care setting, immediate brief behavioral interventions, motivational interviewing, or brief follow-up with PC-MHI. This experience requires fellows work closely with primary care providers and PC-MHI team members to provide recommendations, care coordination, and support for patients' mental health care needs.
- **Brief Outpatient Therapy:** Fellows have the opportunity to carry a caseload of patients for brief outpatient therapy. Patients present with a variety of diagnoses, although our primary focus is on adjustment issues (i.e., adjustment to chronic illness, current life stressors), sleep disturbance, and mild depression/anxiety.
- **Cognitive Behavioral Therapy for Insomnia (CBT-I):** Fellows respond to consults for insomnia and provide CBT-I as appropriate. Fellows will learn to assess for and differentiate insomnia and other relevant sleep disorders and conditions that may impact sleep. Fellows will learn to implement CBT-I in both group and individual formats.
- **Metabolic and Obesity Clinic (MOC):** Fellows have the opportunity to work as part of an integrated medical weight loss clinic in primary care. Patients in this clinic have high risk weight-related comorbidities such as non-alcoholic fatty liver disease (NAFLD) and metabolic syndromes. The clinic offers options for medical weight loss including weight loss medications and surgical weight loss. The team consists of a primary care physicians, specialty endocrine and hepatology providers, a dietitian, pharmacist and trainees of these disciplines. Fellows will have the opportunity to conduct initial intakes with patients presenting to the clinic to assess appropriateness for the clinic from a mental health perspective. Fellows will also provide

interventions to patients enrolled in the clinic. These include behavioral weight loss interventions, treatment for mild to moderate and subclinical binge eating disorder and motivational interviewing to engage patients in lifestyle changes. The fellow would also attend and provide input on multidisciplinary team meetings. Finally there also be the opportunity to conduct presurgical bariatric evaluations for patients who are considering bariatric surgery.

The following is an example of a possible schedule for a fellow with an emphasis in Health Psychology:

**Major Rotation:**  
**Health Psychology**

<u>Months 1-6</u>	<u>Months 7-12</u>
<ul style="list-style-type: none"> <li>• Pain Psychology</li> <li>• Presurgical Evaluation and Rehab</li> </ul>	<ul style="list-style-type: none"> <li>• PC-MHI with emphasis in Insomnia and Weight</li> <li>• HPDP</li> </ul>

**Minor Rotation:**  
**Geropsychology**

<u>Months 1-4</u>	<u>Months 5-8</u>	<u>Months 9-12</u>
<ul style="list-style-type: none"> <li>• Home-Based Primary Care</li> </ul>	<ul style="list-style-type: none"> <li>• Geriatric Outpatient Clinic</li> </ul>	<ul style="list-style-type: none"> <li>• Geriatric Medical Psychology Clinic</li> </ul>

\*\*You will have the opportunity to meet with the training committee to select rotations. The committee may require certain training experiences if they are deemed necessary to provide you with well-rounded training opportunities.



## **DIDACTICS AND SEMINARS**

Several hours each month are designated for attendance at required didactic activities. Attendance and participation in these activities takes precedence over service delivery activities or other meetings. In addition to the didactics listed below there are many opportunities for participation in grand rounds, intern presentation series, round tables, and education conference calls.

### **PSYCHOLOGY POSTDOCTORAL FELLOWSHIP SEMINAR SERIES**

The Psychology Postdoctoral Fellow Seminar Series is conducted by psychology staff members, other disciplines from the medical center, University of Utah professionals, and community professionals, with topics varying from year to year depending on programmatic issues and postdoctoral fellow needs/interests. Recent didactics have included the following:

- Models of Adjustment to Chronic Illness and Disability
- Mild TBI
- EPPP & Licensure
- Complicated mTBI, Moderate, & Severe
- Stroke
- Motivational Interviewing for Healthcare Providers
- History and Models of Primary Care
- Federal & State Programs
- Transplant Evaluation
- Conversion Disorder Illness and Disability
- Psychopharmacology
- Geriatric Psychopharmacology
- Sleep Medicine
- End of Life Psychotherapy
- History and Future of Psychology in the VAMC
- Private Practice
- Capacity Evaluation

### **GEROPSYCHOLOGY COLLABORATIVE SEMINAR**

Nationally, VA training programs have partnered together to develop a Geriatric Seminar Series. The goal of this series is to increase each site's access to a variety of topics and experts in the field of Geropsychology. Select topics have included:

- Pikes Peak Model
- Multicultural Issues in Aging
- Geripact
- Anxiety/Depression in Older Adults
- Sleep/CBT-I in Older Adults
- Pain in Older Adults
- ACT for Older Adults
- Sexuality in Aging
- Elder Abuse
- Hospice/Palliative Care
- Bereavement
- Driver's Evaluation
- Caregiving
- Couples Work with Older Adults
- Advocacy
- Board Certification

### **DIVERSITY DIDACTIC SERIES**

Recognizing the need for continuing education and training in the area of multiculturalism and diversity for both psychology staff and trainees, VA training programs have partnered together to develop a Diversity VTEL Seminar Series to increase each site's access to a variety of presenters and

presentations focused on the development of cultural competence in working with diverse Veteran populations. The VTEL presentations are directed at the postdoctoral training level and are given by a range of practitioners and researchers employed in a variety of settings throughout the region. Each presentation includes a brief but substantive didactic presentation and embeds opportunities for group discussion among all participating sites throughout the presentation. Topics vary from year to year. Recent topics have included:

- Military Culture
- Disability Etiquette and Models of Disability
- Microaggressions
- Cultural Factors in Suicide
- Racism/Sexism and how to Intervene with Staff and Veterans
- Ageism/Cultural Differences in Views on Aging
- Privilege and Power
- Culturally Competent Supervision
- White Fragility
- Classism
- Unconscious Bias

### SUPERVISION SEMINAR

This seminar includes readings and discussions highlighting issues in clinical supervision to support the fellow in developing their own identity as a supervisor. Topics include:

- What Makes for Good Supervision?
- Models of Supervision
- Supervisory Self-Assessment
- Ethical Issues
- Working with Difficulties in Supervision
- Addressing Competencies
- Lessons Learned

### MH GRAND ROUNDS

MH Grand Rounds are held on the 2<sup>nd</sup> Wednesday of the month at 8:30-10:00 AM. Quarterly one of the grand rounds meetings is a “MH All hand meeting.” The remainder of the meetings consist of presentations from VA and non-VA providers on topics related to mental health.

### PSYCHOLOGY INTERN PRESENTATION SERIES

Over the course of the training year, predoctoral interns conduct formal presentations, focused on a clinical topic of interest. Fellows are required to participate in this series as professional colleagues. This series is held monthly on the 3<sup>rd</sup> and/or 5<sup>th</sup> Thursdays of the month at 3:00 PM.

### PSYCHOLOGY STAFF MEETING

Additionally all postdoctoral fellows are invited to attend the Psychology Staff Meeting on the first Thursday of the month 3:00-4:00 in Arches Conference Room (currently virtual meeting).

## **FELLOWSHIP PROJECT**

Over the course of your training year, fellows will develop or contribute substantially to a yearlong Postdoctoral Fellowship Project. This project should exemplify the use of the Practitioner-Scholar model of psychology and be based on a clinical topic about which you are interested in learning more. Fellows will work with a specific supervisor/mentor for the project and ensure that the project meets the following goals/objectives:

- Is based on research
- Increases your knowledge and expertise in a topic of interest
- Contributes to the knowledge-base and/or improves clinical practice in Behavioral Health, Integrated Care, Health Promotion and Disease Prevention, Geropsychology, or Rural Health.
- Provides you with a foundation and/or skill set that will increase your opportunities for VA employment.

Fellows should be considering topics for the fellowship project early in the training year and have a solid idea of their project within three months after starting the fellowship. Fellows will identify a mentor with an expertise in the content area of their project who will be there to support the fellow and the development of their project throughout in the year. Fellows are responsible for delivering a formal presentation of this project to the Psychology Staff, fellows, and psychology interns. Past fellowship projects have included:

- ACT for Smoking Cessation in Primary Care
- Pacific Rim Project: US Affiliated Pacific Island and the Philippines Access to Care and Service Needs
- Examining the Functional and Psychological Outcome of Group Cognitive-Behavioral Therapy among Women Veterans with Chronic Pain in a Primary Care Setting
- Chronic Pain Needs Assessment and Education Class in Primary Care
- VA PACT Team Perspectives on Managing Psychiatric and Cognitive Problems in Aging Rural Veterans: A Qualitative Data Analysis
- Life Sustaining Treatments: A Glance into our Patient's Perspective

## **PRESENTATIONS**

Postdoctoral Fellows will have multiple opportunities throughout the year to provide presentations.

### **PSYCHOLOGY INTERN DIDACTICS**

Fellows will develop presentation and teaching skills by preparing and delivering an independent seminar for the Psychology Intern Seminar Series. Fellows will review the topics that have been presented in the past, and try to offer training that will contribute meaningfully to the series.

### **PUB CLUB**

Pub Club is meant to be a true exchange between postdoctoral fellows. Fellows will meet collaboratively to determine the expectations of Pub Club and rotate the selection of an article. Our hope is that trainees can critically evaluate meaningful or useful readings from psychological literature.

### **POSTDOCTORAL PROJECT PRESENTATION**

Over the course of the year, fellows will engage in a yearlong project (see Fellowship Project Section). Fellows are responsible for delivering a formal presentation of this project to the Psychology Staff, fellows, and psychology interns.

## **SUPERVISION**

Psychology fellows will be supervised by licensed psychologists who are credentialed providers through the VA Medical Center. All fellows have at least two primary supervisors at any given time. Supervisors have regular and weekly times for individual supervision. According to APA guidelines fellows must receive a minimum of 2 hours of supervision per week, however, fellows typically receive supervision above and beyond this minimum requirement. There is often a high level of “on the fly” supervision, as care is quickly discussed, prior to moving on to the next patients in rounds (this is not in lieu of supervision, but in addition to). It is also expected that psychology fellows will seek out additional supervision and consultation as needed. For more information on our fellowship training supervisors, please see staff directory at the end of this document.

# **EVALUATION**

## **PSYCHOLOGY COMPETENCY DEVELOPMENT**

The VASLCHCS Psychology Training Programs have recently transitioning from APA Guidelines and Principles to the new Standards of Accreditation. Evaluation is an ongoing, continuous, and reciprocal process. The Postdoctoral Training Committee encourages and supports open and thorough communication between supervisors and fellows regarding training needs, objectives, and competencies. In addition, scheduled, formal evaluation processes occur throughout the postdoctoral year. The VASLCHCS Psychology Fellowship provides training in following competency domains:

1. Research
  - Demonstrates the substantially independent ability to critically evaluate and disseminate research or other scholarly activities (e.g., case conference, intern presentation, publications) at the local or hospital, regional, or national level.
2. Ethical and legal standards
  - Is knowledgeable of and acts in accordance with each of the following:
    - The current version of the APA Ethical Principles of Psychologists and Code of Conduct.
    - Relevant professional standards and guidelines.
    - Recognizes ethical dilemmas as they arise, and applies ethical decision-making processes in order to resolve the dilemmas.
  - Conducts self in an ethical manner in all professional activities
3. Individual and cultural diversity
  - Understands how personal/cultural history, attitudes, and biases may affect personal understanding and interaction with people different from oneself.
  - Demonstrates knowledge of current theoretical and empirical knowledge base as it relates to addressing diversity in all professional activities including direct service, consultation, training, research, and supervision.
  - Demonstrates integration of awareness and knowledge of individual and cultural differences in the conduct of professional roles (e.g., service, research, and other professional activities).
  - Demonstrates the ability to independently apply knowledge and skill in working effectively with the range of diverse individuals and groups encountered during training.
4. Professional values, attitudes, and behaviors
  - Behaves in ways that reflect the values and attitudes of psychology, including integrity, deportment, professional identity, accountability, lifelong learning, and concern for the welfare of others.
  - Engages in self-reflection regarding one's personal and professional functioning; engages in activities to maintain and improve performance, well-being, and professional effectiveness.
  - Actively seeks and demonstrate openness and responsiveness to feedback and supervision.



- Responds professionally in increasingly complex situations with a greater degree of independence as s/he progresses across levels of training.
5. Communication and interpersonal skills
    - Develops and maintains effective relationships with a wide range of individuals, including colleagues, clients, organizations, supervisors, peers, and supervisees.
    - Produces and comprehends oral, nonverbal, and written communications that are informative and well-integrated; demonstrates a thorough grasp of professional language and concepts
    - Demonstrates effective interpersonal skills and the ability to manage difficult communication well.
  6. Assessment
    - Selects and applies assessment methods that draw from the best available empirical literature and that reflect the science of measurement and psychometrics.
    - Collects relevant data using multiple sources and methods appropriate to the identified goals and questions of the assessment as well as relevant diversity characteristics of the service recipient.
    - Interprets assessment results, following current research and professional standards and guidelines, to inform case conceptualization, classification, and recommendations, while guarding against decision-making biases, distinguishing the aspects of assessment that are subjective from those that are objective.
    - Communicates orally and in written documents the findings and implications of the assessment in an accurate and effective manner sensitive to a range of audiences.
  7. Intervention
    - Establishes and maintains effective relationships with the recipients of psychological services.
    - Develops evidence-based intervention plans specific to the service delivery goals.
    - Implements interventions informed by the current scientific literature, assessment findings, diversity characteristics, and contextual variables.
    - Demonstrates the ability to apply the relevant research literature to clinical decision making.
    - Modifies and adapts evidence-based approaches effectively when a clear evidence-base is lacking.
    - Evaluates intervention effectiveness, and adapts intervention goals and methods consistent with ongoing evaluation.
  8. Supervision
    - Applies the knowledge of supervision models and practices in direct or simulated practice with supervisors, psychology trainees, or other health professionals.
  9. Consultation and interprofessional/interdisciplinary skills
    - Demonstrates knowledge and communicates respect for other disciplines' roles and perspectives

Applies knowledge and skills of consultation practices in direct or simulated consultation with individuals and their families, other health care professionals, interprofessional groups, or systems related to health and behavior.

## EVALUATIONS

Fellows are formally evaluated in writing at the end of each rotation. Supervisors vary significantly based on their style, focus, methods, how focused they are on either process or content, and expectations. However, what is constant is our expectation that there should *not* be an element of surprise on a formal evaluation; a fellow should be very aware of how he or she is doing on that rotation, prior to rotation's end. To facilitate ongoing evaluation and meet the training needs of the fellow, the fellow's performance is regularly discussed among the training supervisors at training committee meetings.

Fellows receive formal, written evaluations from their supervisors on the extent to which they are meeting fellowship requirements and performance expectations. The feedback addresses the fellow's performance and progress in terms of professional conduct and psychological knowledge, skills, and awareness in the competencies for psychology. Additionally, fellows meet individually with the Postdoctoral Fellowship Training Director quarterly for informal check-ins.

# **APPLICATION PROCESS**

## **ELIGIBILITY REQUIREMENTS**

Applicants must meet the following eligibility requirements for the postdoctoral training program:

1. Completion of doctoral degree, including defense of dissertation, from an APA-accredited Clinical or Counseling Psychology Doctoral Program before the fellowship start date.\*
2. Completion of an APA-accredited psychology internship program before the fellowship start date or another Veterans Affairs Internship that is in process of APA accreditation.\*
3. U.S. citizenship
4. Applicants must meet the State of Utah requirement for licensure as a Certified Psychology Resident. For more information please access the Utah Division of Occupational and Professional Licensing:

<http://www.dopl.utah.gov/licensing/psychology.html>

Those not meeting the eligibility requirements will be notified as soon as possible. Failure to meet the above qualifications prior to the fellowship start date could nullify an offer to a candidate.

Fellows are considered federal employees and, therefore, must meet all federal employee requirements, including a background check, pre-employment physical examination, and drug screening. Other branches of the federal government may also conduct routine background checks at their discretion as well. Official hiring is contingent on meeting all of these federal requirements.

\*If you have not yet completed your internship and degree by the time of the application, the Training Directors of both your doctoral programs and internship must verify that you are expected to complete these requirements prior to the start of the postdoctoral fellowship. Applicants must provide verification of a degree prior to an agreed upon postdoctoral training start date.

## **APPLICATION PROCEDURES**

Submit the APPIC APPA CAS Online application no later than 5pm on January 1, 2021. Please use the following web address to access the application website:

<https://appicpostdoc.liaisoncas.com/applicant-ux/#/login>

- In the cover letter describe your training goals, how our postdoctoral fellowship program will help you achieve those goals, and how your previous training and experiences qualify you for this fellowship training. Further, please discuss your general career goals. Please specify the Health Psychology track or Geropsychology track (or both).
- Include a curriculum vitae;
- Include 3 letters of recommendation from faculty members or clinical supervisors who are familiar with your professional development and training. Please include at least one letter from an internship supervisor.
- Include a letter of certification from your Internship Training Director that you are:

1. in good standing
  2. expected to matriculate on time
  3. indicate the last day of internship
- Include a brief statement regarding the status of your dissertation or research project and expected graduation date from your graduate school program;
  - Include graduate transcripts.

<u>Dates to Remember:</u>	
• Application Deadline:	January 1, 2021
• Interviews:	Late January to early February
• Offers Extended:	February 22, 2021 (In coordination with APPIC notification guidelines)
• Projected Fellowship Start Date:	August 30, 2021

Applicants with questions about the Geropsychology and Health psychology tracks of the postdoctoral fellowship or about the Salt Lake City VA please contact:

Renn Sweeney, Ph.D.  
Psychology Postdoctoral Fellowship Program Co-Director  
Primary Care Behavioral Health Service (111BH)  
VA Salt Lake City Health Care System  
500 Foothill Blvd.  
Salt Lake City, UT 84148  
Phone: (801) 582-1565 (Ext. 2088)  
e-mail: [caroline.sweeney@va.gov](mailto:caroline.sweeney@va.gov)

## APPLICATION EVALUATION

Each set of application materials received by the due date will be reviewed by members of the selection committee. Independent ratings are based on professional training and experiences thus far, writing, and professional letters of recommendation. The selection criteria focus on all aspects of the application materials, with emphasis placed on background training, experience, and an applicant's clear articulation of training goals and professional aspirations, and overall fit.

After an average score is calculated, the selection committee addresses significant discrepancies in scores, and determines the cut-off score to participate in the interview process.

Interviews are typically planned for mid to late January to early February, but this can vary based on the schedules of applicants. In addition to being interviewed by two members of the Selection Committee, applicants will have the opportunity to meet current interns, fellows, and staff members. Due to COVID-19 all interviews will be offered virtually this year.

Following all interviews, the Selection Committee will meet to identify the top candidates and alternates for positions. These selections are based on an integration of file and interview ratings, with the entire list of interviewees being reviewed to ensure that all candidates have received fair and equal consideration.

The Clinical Psychology Postdoctoral Program at VA Salt Lake City Health Care System is a member of the Association of Psychology Postdoctoral and Internship Centers (APPIC) and will abide by all APPIC guidelines regarding fellowship recruitment and notification procedures.

## **STIPEND AND BENEFITS**

Fellows for the 2020-2021 received a stipend of \$46,222. Stipends for the 2021-2022 training year will be announced by the Office of Academic Affiliations (OAA). Stipends are paid in equal installments over 26 bi-weekly pay periods. Fellows are not covered by civil service retirement, but are eligible for federal employee group life insurance and health benefits.

Over the course of the year, fellows earn approximately 13 vacation days and 13 sick days, in addition to 10 federal holidays. Fellows who work 40 hours per week can fulfill their commitment and still have time for vacations and sick leave. The VA Salt Lake City Health Care System's policy on Authorized Leave is consistent with the national standard.

Postdoctoral fellows at the VASLCHCS are provided with all rights, benefits, and responsibilities associated with "Employee" status. As such, they are expected to comply with all medical center policies pertaining to employee behavior, including leave.

Fellows may also apply for limited hourly credit for attendance at national and regional professional meetings and workshops through their primary supervisor and Postdoctoral Training Committee.

## **COMMITMENT TO DIVERSITY**

The VASLCHCS Psychology Service has made efforts to recruit and maintain a diverse psychology staff in a geographic region with limited ethnic and racial diversity. As such, the Fellowship Program places a high value on attracting a diverse group of interns and on maintaining an awareness of diversity issues during the fellowship year. The program appreciates the fact that attracting a diverse group of fellows is important, not only for the fellowship, but for the staff as well.

Throughout the training year, the training program provides various learning activities and trainings that build upon the multicultural competency from graduate training. For example, the training program schedules a number of seminars directly dealing with a variety of diversity topics. We have speakers discuss issues of multicultural competency, religion/spirituality, gender, sexual orientation, culture, and age. The topics vary year to year, in large part due to the requests of the individual training cohort and their needs as determined by the training director.





## EQUAL OPPORTUNITY EMPLOYER

The VASLCHCS is an Equal Opportunity Employer. The Psychology Service actively supports and is in full compliance with the spirit and principle of Affirmative Action in the recruitment and selection of staff and fellows. We provide equal opportunities in employment and training for all qualified persons and do not discriminate on the basis of race, color, religion, sex, national origin, age, disabilities, ethnicity, or sexual orientation. In accordance with federal government employment regulations, only citizens of the United States are eligible for training positions funded by the Department of Veterans Affairs.

## PRIVACY POLICY

We collect no personal information from you when you visit our web site.

## **FELLOWSHIP TRAINING SUPERVISORS**

In order to provide a sense of our staff, a brief biography for each of our supervisory psychologists is included below:



### **Tracy Black, Ph.D.**

**Training background:** Utah State University, Clinical Psychology

**Predoctoral Internship:** VA Salt Lake City Health Care System

**Postdoctoral Fellowship:** Roswell Park Cancer Institute, Buffalo, NY

**Current Position:** Supervisor for Medical Psych Service, PC-MHI, and mental health transplant services.

**Areas of interest/expertise:** Health psychology, psychosocial oncology, bereavement, health behavior change, and coping with chronic illness.

**Fun Facts:** My true passions are my children, running, traveling, cooking, eating out (hence the running), and spending time in my yard.

Email: [Tracy.Black-Cecchini@va.gov](mailto:Tracy.Black-Cecchini@va.gov)



### **Lauren Greenberg, Psy.D.**

**Training background:** Baylor University, Clinical Psychology

**Predoctoral Internship:** VA Salt Lake City Health Care System

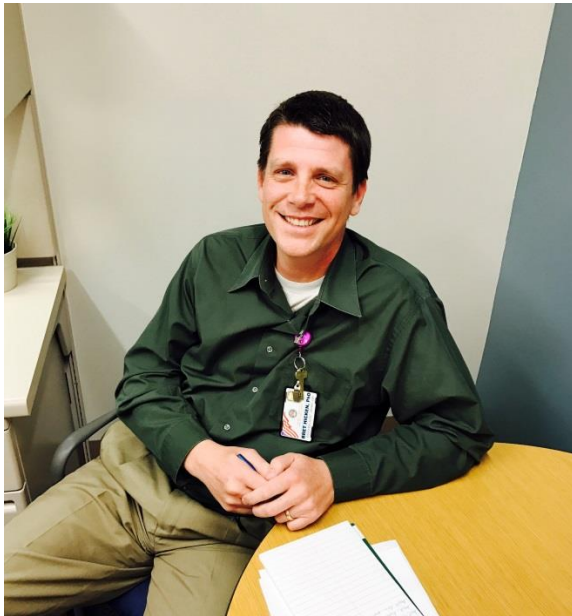
**Postdoctoral Fellowship:** VA Salt Lake City Health Care System, Integrated Primary Care Health Psychology- Geropsychology Track

**Current Position:** Staff Psychologist for Home Based Primary Care/Geriatrics

**Areas of interest/expertise:** Geropsychology, dementia evaluation and management, neuropsychological assessment, caregiver intervention, insomnia, trauma reactions in later life.

**Fun Facts:** I enjoy hiking, getting 10,000 steps per day, traveling, playing golf (poorly), hanging out with my miniature Australian shepherd, and trying new restaurants/tracking down my favorite food trucks.

Email: [lauren.greenberg2@va.gov](mailto:lauren.greenberg2@va.gov)



### **Bret Hicken, Ph.D.**

**Training Background:** University of Alabama at Birmingham, Clinical Psychology

**Predoctoral Internship:** VA Salt Lake City Health Care System

**Postdoctoral Fellowship:** Geriatrics Research, Education, and Clinical Center, VA Salt Lake City Health Care System

**Current Position:** Psychologist/Geriatric Team Lead – Veterans Rural Health Resource Center-SLC, Supervisor for Outpatient Geriatric Clinics

**Areas of Interest/Expertise:** Geropsychology, capacity evaluation, dementia assessment & treatment, rural health, caregiver support, program development/evaluation.

**Fun Facts:** My hobbies include gardening, cycling, urban chicken husbandry, reading prescription inserts, and coming up with interesting things to say for my Fun Facts. I own a white dog. Once I rode a camel.

**Email:** [bret.hicken@va.gov](mailto:bret.hicken@va.gov)



### **Karen Jordan, Ph.D.**

**Training background:** University of Arizona, Clinical Psychology

**Predoctoral Internship:** VA Maryland Health Care System

**Postdoctoral Fellowship:** VA Maryland Health Care System, Primary Care - Mental Health Integration

**Current Position:** PC-MHI Psychologist, Rehab Psychology

**Areas of interest/expertise:** health psychology, brief intervention, motivational interviewing

**Fun Facts:** I enjoy baking, subjecting colleagues to my baking, being outside, my dog and cat, and I love to read the comment section on just about anything.

**Email:** [Karen.Jordan2@va.gov](mailto:Karen.Jordan2@va.gov)





### **Amanda Kutz, Ph.D.**

**Training Background:** University of Maine, Clinical Psychology

**Predoctoral Internship:** WellSpan Health, York, Pennsylvania

**Postdoctoral Fellowship:** White River Junction VAMC- Primary Care Integration & Health Psychology

**Current Position:** Staff Psychologist for Primary Care- Mental Health Integration

**Areas of Interest/Expertise:** Integrated Healthcare, Insomnia, Binge Eating Disorder, Weight Management, Diabetes Management, Brief Behavioral/Cognitive-Behavioral Interventions

**Fun Facts:** I love all of the opportunities to do outdoors activities Utah offers (e.g., hiking, skiing, camping). Other interests include cats, trying new restaurants, and thrift shopping/flea markets. I was on a bowling league in grad school (for fun- I am not a good bowler).

**Email:** [Amanda.kutz@va.gov](mailto:Amanda.kutz@va.gov)



### **Amber Martinson, Ph.D.**

**Training Background:** University of Maine, Clinical Psychology

**Predoctoral Internship:** VA Salt Lake City Health Care System, General Track

**Postdoctoral Fellowship:** VA Salt Lake City Health Care System, Integrated Primary Care Health Psychology

**Current Position:** Medical Psychology (Inpatient Mental Health Consult Liaison Service, Primary Care Pain Psychology)

**Areas of Interest/Expertise:** Biological correlates of trauma/stress, chronic pain, coping with life-limiting illness, neurocognitive disorders. I adhere to a biopsychosocial approach within a cognitive-behavioral framework.

**Fun Facts:** I enjoy skiing, hiking, running, visiting Maine, and spending time with my family. Guilty pleasures include watching celebrity gossip shows (e.g., TMZ), eating chocolate, and avoiding vegetables.

**Email:** [Amber.Martinson@va.gov](mailto:Amber.Martinson@va.gov)



## **Renn Sweeney, Ph.D.**

**Training Background:** University of Utah, Clinical Psychology

**Predoctoral Internship:** VA Salt Lake City Health Care System

**Postdoctoral Fellowship:** Memphis VA Health Care System, emphasis in Medical Psychology

**Current Position:** Health Behavior Coordinator; Psychology Postdoctoral Fellowship Co-Director

**Areas of Interest/Expertise:** Integrative Healthcare, Health and Behavior Change, Brief Treatment, Stress and Coping with Chronic Illness, Tobacco Cessation, and Insomnia.

**Fun Facts:** I have a son born in 2011 and a daughter born in 2015, so my husband and I spend most of our time trying to keep up with them. We find that our “free time” centers around soccer games, gymnastics, teaching our kids to ski (so that we can ski again). As many others in Utah, I relish the outdoors and the recreation that the area has to offer. On summer/fall weekends, I enjoy family camping trips in our pop-up trailer. I love to cook, run, and am an avid gardener.

**Email:** [caroline.sweeney@va.gov](mailto:caroline.sweeney@va.gov)

## **ABOUT SALT LAKE CITY AND UTAH**



In addition to the benefits of the training program, living in Salt Lake City comes with many perks. The close proximity of Salt Lake City to several major mountain ranges offers all the benefits of city living with easily accessible outdoor recreation. We hope that you enjoy the area as much as we do.

According to the 2019 census, Salt Lake City has a population of 200,567. The surrounding metropolitan area has close to 2 million people. Individuals unfamiliar with Salt Lake City and the state of Utah are often quite surprised at the wealth and variety of things to do and see. Salt Lake City is a montage of modern high-rises, commercial centers, unique sightseeing attractions, classic buildings, historic sites, excellent restaurants, and beautiful shopping malls. The city is also home to acclaimed ballet dance companies, the Utah Opera Company, many fine art galleries, and historical and art museums. Nearby Park City is home to the Sundance Film Festival. Professional sports fans enjoy cheering for the Utah Jazz, Utah Grizzlies and Utah Royals. During the summer, baseball fans flock to Franklin Covey Field to watch the Salt Lake Bees, the Triple-A affiliate of the Anaheim Angels. Finally, fans of college sports find one of the NCAA's most entertaining and bitter rivalries between the Brigham Young University Cougars and the University of Utah Utes, both of whom are nationally ranked in football.

For the outdoor recreational enthusiast, Utah is truly a paradise. During the winter months, Utah has "The Greatest Snow on Earth." Eleven resorts are within an hour drive of Salt Lake City. During the summer months, Utahans take advantage of over 1,000 lakes, rivers and streams. Sailing, wind surfing, kayaking, rock climbing and mountain biking are extremely popular during the warmer months as well. Utah has five national parks: Arches National Park, Bryce Canyon National Park, Canyonlands National Park, Capitol Reef National Park, and Zion National Park. We're a short drive to Yellowstone and Teton National Park as well.



## **LIFE AFTER FELLOWSHIP**

Typically our fellows receive multiple interviews offers and get their tops choices for staff positions after fellowship. However, the path you take following fellowship is defined by you and is a balance of your own professional and personal goals. Whether it is pursuing a full-time career, working part-time to be home with children, or taking time off, we will support you in getting wherever you want to go. Below are some are examples of where past fellows have secured positions following fellowship:

- Intermountain Healthcare (IHC)
- Private Practice
- University of Utah Neuropsychiatric Institute (UNI)
- University of Utah Pain Management Center
- University of Utah Physical Medicine and Rehabilitation
- VA Salt Lake City Healthcare System
- VA Popular Bluff Healthcare System
- VA Iowa City Healthcare System
- University of Montana Family Practice

